REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL	Application Number	09/489,134
	Confirmation Number	5405
	Filing Date	January 21, 200(
	First Named Inventor	William J. BAE :
MAIL STOP RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Group Art Unit	2162
	Examiner Name	Hung Q. PHAM
Subsection (b) of 35 U.S.C. § 132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995	Matter Number	A8501
	Title	SYSTEM AND METHOD FOR CREATING COMPILATIONS OF CONTEN'

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

1. SUBMISSION REQUIRED UNDER 37 C.F.R. § 1.114

a. ☐ Previously submitted

   i. ☐ Please enter and consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____

   ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____ _____

   iii. ☐ Other _____

b. ☑ Enclosed

   i. ☑ Amendment/Reply

   ii. ☐ Affidavit(s)/Declaration(s)

   iii. ☐ Information Disclosure Statements (IDS)

   iv. ☑ Petition for Extension of Time

   v. ☐ Other _____

> **Certificate of Transmission**
> I hereby certify that this corresponde ice is being facsimile transmitted to the Pa ent and Trademark Office Fax No. (703) 87: -9306 on March 21, 2005.
> _Ruthleen E. Uy_
> Ruthleen E. Uy
> Reg. No. 51,361

2. MISCELLANEOUS

a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103( ) for a period of _____ months

b. ☐ Other _____

3. FEES

The USPTO is directed and authorized to charge the RCE statutory fee of $790.00 and/or all required fees, except for the Issue Fee and the Publication Fee, to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account. A duplicate copy of this transmittal letter is attached.

CORRESPONDENCE ADDRESS

Direct all correspondence to the address for SUGHRUE MION, PLLC filed under the Customer Number listed below:

WASHINGTON OFFICE

23373

CUSTOMER NUMBER

SIGNATURE OF ATTORNEY

Name	Ruthleen E. Uy	Registration No.	51,361
Signature		Date	March 21, 2005

03/24/2005 EHOPPEH 00000003 194000 09489134

01 FC:1801   790.00 DA

02 FC:1251   120.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999

Application or Docket Number: 09/489,134

CLAIMS AS FILED - PART I

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)
BASIC FEE		
TOTAL CLAIMS	90 minus 20=	70
INDEPENDENT CLAIMS	6 minus 3 =	3
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

	SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
	RATE	FEE	OR	RATE	FEE
BASIC FEE		345.00	OR		690.00
TOTAL CLAIMS	X$ 9=		OR	X$18=	1260
INDEPENDENT CLAIMS	X39=		OR	X78=	234
	+130=		OR	+260=	
	TOTAL		OR	TOTAL	2134

CLAIMS AS AMENDED - PART II

AMENDMENT (first box)

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)
Total		Minus	99	
Independent		Minus	6	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total	X$ 9=		OR	X$18=	
Independent	X39=		OR	X78=	
	+130=		OR	+260=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT (second box)

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)
Total		Minus		=
Independent		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total	X$ 9=		OR	X$18=	
Independent	X39=		OR	X78=	
	+130=		OR	+260=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT (third box)

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)
Total		Minus		=
Independent		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total	X$ 9=		OR	X$18=	
Independent	X39=		OR	X78=	
	+130=		OR	+260=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999

Application or Docket Number: 09/489,134

CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA	SMALL ENTITY TYPE ☐ RATE	FEE	OR	OTHER THAN SMALL ENTITY RATE	FEE
BASIC FEE				345.00	OR		690.00
TOTAL CLAIMS	90 minus 20=	70	X$ 9=		OR	X$18=	126
INDEPENDENT CLAIMS	6 minus 3 =	3	X39=		OR	X78=	234
MULTIPLE DEPENDENT CLAIM PRESENT			+130=		OR	+260=	
			TOTAL		OR	TOTAL	2134

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
Total	90	Minus 90	=	X$ 9=		OR	X$18=	1
Independent	6	Minus 6	=	X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+130=		OR	+260=	
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total	99	Minus 90	= 9	X$ 9=		OR	X$18=	162
Independent	6	Minus 6	=	X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+130=		OR	+260=	
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	162

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total	99	Minus 99	=	X$ 9=		OR	X$18=	
Independent	6	Minus 6	=	X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+130=		OR	+260=	
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875
(Rev. 12/99)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE